

DEPARTMENT OF CORRECTIONS MONTANA STATE PRISON OPERATIONAL PROCEDURE

Procedure No.: MSP 1.3.16A	Subject: RELIGIOUS VOLUNTEER SERVICES				
Reference: DOC Policy 1.3.16			Page 1 of 3 and two attachments		
Effective Date: January 11, 2008		Revision Date	e:		
Signature/Title: /s/ Mike Mahoney / Warden					

I. PURPOSE

To use volunteers and religious activity guests to help provide important religious services for the benefit of staff and inmates. Religious volunteers and activity guests will not perform duties that are normally performed by paid staff.

II. **DEFINITIONS**

<u>Volunteer</u> – a person who has been approved to provide services for MSP without compensation. The three types for religious activities are:

- 1. <u>Approved Religious Volunteer</u> a volunteer that provides religious services over an extended time frame.
- 2. <u>Chaplain Service Volunteer</u> a faith group representative, approved by the Warden or designee and endorsed by an approved faith group organization, who provides pastoral ministry upon completion of the full MSP pre-service training course.
- 3. <u>Religious Activity Guest</u> a person that provides a specific function for a single religious event or within a limited time frame.

III. PROCEDURES

A. RAC Coordinator Responsibilities

- 1. Oversees the recruitment, screening, training, and supervision of all religious volunteers and activity guests and their activities.
- 2. Organizes, monitors, and manages the MSP religious volunteer program.

B. Applications

- 1. Volunteers must complete and return an MSP Volunteer Application Form (attachment A).
- 2. Religious activity guests must contact RAC staff at least ten business days in advance of the activity. RAC staff will interview the guest and record the information on the first page of an *MSP Volunteer Application Form* (attachment A).

C. Eligibility

Applicants must meet the following eligibility requirements and pass screening criteria to be approved pending training:

- 1. Must be 18 years of age or older.
- 2. Must pass a criminal background check.
 - a. An applicant who is currently under supervision or is wanted for a criminal offense will not be selected as a volunteer recruit.
 - b. An applicant previously under the care, custody, or supervision of the Department of Corrections will generally not be selected as a volunteer recruit, however on a case-by-case basis a person may be approved in accordance with *DOC Policy*

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1.3.4, Employee Selection Guidelines.

- 3. An applicant who is the crime victim of an inmate incarcerated at MSP will not be selected as a volunteer recruit. If an immediate family member of the applicant is the crime victim of an inmate incarcerated at MSP the applicant will generally not be selected as a volunteer recruit.
- 4. Applicants who are an immediate family member (spouse, parent, step parent, sibling, step sibling, grandparent, step grandparent, child, or step child) of an offender that is in secure care under the supervision of the Department are ineligible.
- 5. Applicants who are on the visiting list of an offender under the supervision of the Department are ineligible.

D. Training

- 1. The RAC Coordinator will ensure each religious activity guest applicant who meets the eligibility requirements and passes the screening criteria receives, reviews, and acknowledges by signature an abbreviated training curriculum that outlines their expectations.
- 2. Approved volunteer applicants must meet the eligibility requirements and pass screening criteria to become a volunteer training recruit. A recruit must successfully complete the on-site MSP volunteer training curriculum before being certified as an Approved Volunteer. The training curriculum will include policies, procedures, and rules relevant to the effective function of a volunteer.
- 3. Chaplain Service Volunteers must meet eligibility requirements (including endorsement of their faith group organization), pass screening criteria, obtain written approval of the Warden or designee, and successfully complete the full pre-service training curriculum.
- 4. After successful completion of the required training volunteers must agree to abide by all policies, procedures, rules, obligations, and written responsibilities by signing a *Volunteer Service Agreement* (attachment B) and *Volunteer Training & Orientation Checklist* (attachment C) before being approved to provide a volunteer service.

E. Supervision

The RAC Coordinator will ensure that each guest and volunteer is properly supervised.

- 1. Religious activity guests must have a staff member with them at all times.
- 2. The supervision required for each volunteers will be determined by the Security Major in consultation with the RAC Coordinator. Variables such as the work setting, inmate to volunteer ratio, inmate custody level, and officer availability will be considered.

E. Volunteer Transportation

- 1. Religious activity guests and volunteers may travel in, but not drive, Department or assigned government vehicles.
- 2. Under no circumstances will inmates be transported in anyone's personal vehicle.
- 3. On a case-by-case basis the Warden may authorize a religious volunteer in good standing to transport an inmate off facility property upon his discharge from DOC supervision.

F. Termination

1. An individual religious volunteer, religious activity guest, or a volunteer program may be suspended at any time, with or without cause, by the Shift Commander or designee.

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2. An individual religious volunteer or a volunteer program may be terminated at any time, with or without cause, by the Warden or designee. The RAC Coordinator is responsible to inform affected religious volunteers of the termination and the reasons for it.

IV. CLOSING

Questions concerning this operational procedure will be directed to the RAC Coordinator.

V. ATTACHMENTS

MSP Volunteer Application Form	Attachment A
Volunteer Service Agreement	Attachment B
Volunteer Training & Orientation Checklist	Attachment C

MSP VOLUNTEER APPLICATION FORM

Name:		Date:		/	/
Date of Birth:/	Gender:	Female	e 🗌	Male	
Social Security Number:					
Residence:					
Address:	Phone: ()-	-		
City:	State:		Zip C	'ode:	
Work:					
Address:	Phone: ()-	_		
City:	Phone: (,	Zip C	ode:	
			•		
Emergency Contact:					
Name:	Dhono: (`			
Address:	Phone: ()	7in (lada:	
City:	State:		Zip C	.oue:	
Have you ever been convicted of a felony or misdemeanor?	Yes 🗌	No 🗆			
If so please explain:					
The product compression					
Are you related to an offender supervised by the Montana Depa	artment of Correction	ns?	Yes		No \square
If so please list their name(s) and you relationship to them:					
Name:	Relation	nship:			
Name:					
Name:		nship:			
Name:	Relation	nship:_			
				\neg	
Are you visiting an offender supervised by the Montana Depart		s?	Yes L		No 🗆
If so please list their name(s) and you relationship to them:					
Name:					
Name:		nship:_			
Name:	Relation	nship:_			
Name:	Relation	nshıp:_			
TI	4- 1 -4 MCD9		3 7 「	٦	NI.
Have you ever been the crime victim an inmate currently incard	cerated at MSP?		Y es L		No 🗆
If so please list their name(s):					
Name:					
Name:					
William in the continuous and th	C4-4- D . 0				
What is the volunteer position you requesting to fill at Montana	State Prison?				

(over)

If you are requesting to be a religious volunt follows:	teer please indicate which faith group	by circling it fi	rom the list that
Alcoholics Annonymous Bible Study Jehovah Witness Promise Keepers	Bahai Buddhist Latter Day Saints Seventh Day Adventist	Baptist Bible Christian Brot Native Americ Catholic	
Protestant Wiccan	Hindu Judaism	Islam Odonist	
Other:	ouddisiii	Cumst	
What qualifications and or certification do y you requested above? Please attach copies of check on this information.			
Are you willing to work with other voluntee	rs serving in this capacity, if any?	Yes 🗆	No 🗆
I am requesting consideration to become a vagree to attend all required training and follotrainee. I understand that a full background the application screening procedure in accor 552a. I also understand that my person and	ow all MSP policies, rules, and proced check, including criminal background dance with the Privacy Act, Part 5, U	dures if selected d, will be condunited States Co	d as a volunteer acted as part of ode, Section
Signature:		Date:	/ /

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DEPARTMENT OF CORRECTIONS MONTANA STATE PRISON VOLUNTEER SERVICE AGREEMENT

I,	(print name), do agritions of providing volunteer religious services for Montana State Prison:	ree to the following
1.	I agree to engage only in those assignments or activities that have been assigned RAC Coordinator.	d or authorized by the
2.	I will not present myself as a representative or paid employee of MSP or the De	partment.
3.	I do not expect to receive monetary compensation for my services.	
4.	I agree to avoid undue familiarity with inmates. If an inmate has a problem that my volunteer duties, I will direct him to the appropriate staff. I will not pursue inmate that is outside my assigned responsibility.	
5.	I agree to bring nothing in or take anything out for any inmate except work mate approved by the Shift Commander and RAC Coordinator.	erials that have been pre-
6.	I will not communicate in writing or electronically (phones etc.) with inmates w facility.	hile not at the prison
7.	I will report without delay to the RAC Coordinator or Shift Commander any counusual behavior that may be unethical, illegal, dangerous or potentially danger	
8.	I agree to meet attendance and performance requirements.	
9.	I understand that I am responsible, and therefore liable, for my own actions, and and caution when providing my services.	l agree to use due care
10.	I agree <u>not</u> to report at MSP for my activities under the influence of alcohol or or	drugs.
11.	I agree to engage in only those activities that have been assigned or authorized supplement, but do not supplant, the work of classified Department employees.	for me and that
12.	I understand that offenders under Department jurisdiction have been convicted activity, and that any offender I may have contact with may attempt to take unfataken hostage, I understand that the same rules apply to me as to any Department	air advantage of me. If
	VOLUNTEER'S SIGNATURE	DATE

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MSP RELIGIOUS VOLUNTEER TRAINING & ORIENTATION CHECKLIST

	DOC Mission Statement				
	MSP Mission Statement				
	MSP Guiding Principles				
	Emergency Procedures (including staff and visitor count procedures)				
	Hostage Survival Information				
	MSP 1.3.41, Employee Dress, Uniform, & Hygiene				
	DOC 3.4.2, Prohibited Acts				
	MSP 3.4.3, Tobacco Use Regulations				
	MSP 3.1.5, Entrance Procedures				
	MSP 3.1.17b, Contraband Control				
	MSP 3.1.13, Key Control				
	MSP 3.1.14, Tool Control				
	MSP 3.1.21, Inmate Count & Supervision				
	MSP 3.1.11, Inmate Movement Control				
	MSP 1.3.16A, Religious Volunteer Services				
	DOC 1.3.16, Volunteer Services				
and/or I unde	e received orientation and training in the areas checked above and have had the opportunity to address my concerns. I agree to abide by the policies, procedures, and regulations of MSP erstand that if I violate any standard of conduct my permission to enter the grounds of Monta be suspended and/or terminated and I may be subject to a criminal investigation by law enformations.	ana S	State		
	NAME (PLEASE PRINT) ORGANIZATION				
		/		/	
	SIGNATURE	DA	.TE		
P	PRINTED NAME OF TRAINER/FACILITATOR SIGNATURE OF TRAINER/F	ACILI	TATO)R	

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